

DOG LICENSE APPLICATION

OWNER NAME				
	(PLEASE PRINT)			
HOME PHONE #	WORK PH	ONE #		
STREET/MAILING ADDRESS				
ALTERNATE/EMERGENCY CONTAC	CT NAME			
	PHONE #			
NOTE: IN THE EVENT THAT YOUR ANIMAL SHOULD THE CITY OF MUKILTEO IN RETURNING YOUR ANIM OF A NEIGHBOR OR RELATIVE WHO MAY BE ABLE	MAL TO YOUR HOME, RATHER TH	AN TO PAWS, BY PROVIDING T		
D	OG INFORMATIO	ON		
NAME	BREED			
COLOR	SEX	EX		
IS YOUR DOG SPAYED/NEUTERED (MUST SUBMIT PROOF, IF APPLICABLE)	? DATE OF I	_AST INOCULATION _ ABIES INOCULATION REQUIR	RED)	
MICROCHIP BRAND	#			
NAME & PHONE NUMBER OF VETE	RINARIAN			
PHON	NE NUMBER			
I AM THE OWNER OF TH	HE ABOVE LISTED DOG AND TAK	E FULL RESPONSIBILITY.		
OWNER'S SIGNATURE		DATE		
DRIVER'S LICENSE NUMBER				
1 Year License (Expires 12-31-16)	2016 Fee Schedule	3 Year License (Expire	es 12-31-18)	
Spayed or Neutered \$15.00 Unaltered \$30.00		Spayed or Neutered Unaltered	\$40.00 \$80.00	
Application Received Date:	*****For Official Use Only****	* License # Issued:		
Amount of Fee:				
Receipt #		Issued Rv:		